April 2, 2008

Date

APR 0 2 2008

HDP/SB/21 based on PTO/SB/21 (08-00)

	17	2 2000				
		pplication Manber	10/602,880			
TRANSMITTAL		iling-Date	June 25, 2003			
え FORM	Ir	nventor(s)	Kang Soo SEO et al.			
ngo be used for all correspondence after in	nitial filing)	Group Art Unit	2621			
	E	xaminer Name	Heather Rae Jones			
	A	attorney Docket Number	46500-000535/US			
	ENCLOS	JRES (check all that apply)				
Fee Transmittal Form	Assignmen	nt Papers	After Allowance Communication to Group			
Fee Attached		ne Official Draftsperson and eets of Formal Drawing(s)	LETTER SUBMITTING APPEAL BRIEF AND APPEAL BRIEF (w/cle: version of pending claims)			
Amendment	Licensing-	related Papers	Appeal Communication to Group (Notice of Appeal, Brief, Reply Brief)			
	Petition		Proprietary Information			
Affidavits/declaration(s)		Convert to a al Application	Status Letter			
Extension of Time Request		Attorney, Revocation f Correspondence Address	Other Enclosure(s) (please identify below):			
Express Abandonment Request	Terminal [		- Request for Continued Examination (RCE) Transmitt			
☑ Information Disclosure Statement	CD, Numb	per of CD(s)				
Certified Copy of Priority Document(s)	Remarks					
Response to Missing Parts/ Incomplete Application	MAIL S	TOP: RCE				
Response to Missing Parts under 37 CFR 1.52 or 1.53						
SIGNA	TURE OF AP	PLICANT, ATTORNEY, O	R AGENT			
Firm or Harness, Dickey &		Attorney Name Aaron A. Mace	Reg. No. 61,812			
Signature /						

APR 0 2 2008

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

*XAUENDED	Complete if Known						
FEETRANSMITTAL	Application Number	10/602,880					
for FY 2008	Filing Date	June 25, 2003					
	First Named Inventor	Kang Soo SEO et al.					
Effective 2/8/2006. Patent fees are subject to annual revision.	Examiner Name	Heather Rae Jones 2621					
☐ Applicant claims small entity status. See 37 CFR 1.27	Art Unit						
TOTAL AMOUNT OF PAYMENT (\$) 910	Attorney Docket No.	46500-000535/US					

TOTAL AMOUNT OF PAYMENT (\$) 910							Attorney Docket No.			46500-000535/US				
METHOD OF PAYMENT (check all that apply)							FEE CALCULATION (continued)							
						3. ADDITIONAL FEES								
☑ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order						Large Entity Small Entity								
□ Deposit Acc     □ D	ount:					Fee Code	Fee (\$)		Fee Code	Fee (\$)		scription	Fee Paid	
Deposit					1051	130	1	2051	65	Surcharge - late	•			
Account 08-0750 Number						1052	50		2052	25	or cover sheet.	provisional filing fee		
							130		1053	130	Non-English spe	cification		
Deposit						1812 1804	2,52 920°		1812	2,520		est for reexamination		
Account Name									1804	920*	Requesting publi Examiner action	ication of SIR prior to		
The Director is authorized to: (check all that apply)  ☐ Charge fee(s) indicated below ☑ Credit any overpayments						1805	1,84	0+	1805	1,840*	Requesting publ Examiner action	ication of SIR after		
☐ Charge any additional fee(s) during the pendency of this application						1251	120		2251	60		oly within first month		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.						1252	460		2252	230	Extension for rep	oly within second		
		FEE CALCUL	ATION			1253	1,05	١٥	2253	525		oly within third month		
1. BASIC	FILING	FEE				1254	1,64	- 1	2254	820	Extension for rep	•		
Large Entity	Small J					1255	2,23	.	2255	1,115		oly within fifth month		
Fee Fee	Fee Code		scription		Fee Paid	1401	510	- 1	2401	255	Notice of Appeal			
Code (\$) 1011 310	2011	(\$) 155 Utility f	iling fee		001414	1402	510		2402	255	• •	upport of an appeal		
	2012	•	filing fee	<u> </u>		1403	1,03		2403	515	Request for oral		-	
1012 210 1013 210	2012	•	-	-		1452	510	- 1	2452	255	•	tion to revive – unavoidable		
	2013					1453	1,54	- 1	2453	770		on to revive – unintentional		
						1462	400	- 1	1462	400		er 37 CFR 1.17(f)		
1005 210	2005	105 Provisi	Utat tilling t	L		1463	200	- 1	1463	200		er 37 CFR 1.17(g)		
	s	UBTOTAL (1)		Γ.	\$) 0	1464	130		1464	130		er 37 CFR 1.17(h)	-	
						_	50		1807	50		<u> </u>		
2. EXTRA CI	LAIM FE	ES FOR UTI				1807	50	ı	1007		Submission of Information Disclose			
		Extra Clain		e from	Fee Paid	1806	180		1806	180	Stmt	normation bisologaic		
Independent	==	-26 ** = \( \frac{Claims}{2} \) X \( \frac{50}{50} \) = \( \frac{100}{100} \)							8021	40	Recording each per property (time properties)			
Claims  Multiple		= 0					810		2809	405	Filing a submiss (37 CFR § 1.129	n		
Dependent  Large Entity	. 6-	nall Entity	L		ا ا	1810	810		2810	405	For each addition			
Fee Fee	Fee Fee Pescription 1801 810 2801 405							inued Examination	810					
Code (\$) 1202 50		Code (\$)					Other fee (specify)							
1201 210		2201 105 Independent claims in excess of 3					*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)810							
1203 370	220				n, if not paid	4. SI	EAR	CH/I	EXAMI	NATIO	N FEES	<del></del>		
1204 210	220		Reissue in iginal pater		claims over	1111	510		2111	255	Utility Search Fe	ee		
i		**	•		ess of 20 and	1112	100	- 1	2112	50	Design Search I		<u></u>	
1205 50 2205 25 over original pate			1113	310		2113	155	Plant Search Fe						
	· ·				1114	510		2114	255	Reissue Search				
SUBTOTAL (2) (\$) 100				1311	210	- 1	2311	105	Utility Examinati					
<u> </u>						1312	130	- 1	2312	65	Design Examina			
							160	- 1	2313	80	Plant Examination Fee			
						1313 1314	620	- 1	2314	310	Reissue Examination Fee			
								1				BTOTAL (4) (\$)0	<del></del>	
**or number previously paid, if greater; For Reissues, see above														
SUBMITTED BY Complete (if applicable)														
Name (Print/Tyne		Aaron A. Mace			istration No. orney/Agent)			61,8	812		Telephone	703-668-8000		